| Cofficial Form 1) (12,03) FORM B 1 | | Voluntary Petition |
|---|--|--------------------------------|
| Name of Debtor (if individual, enter Last, First, Middle): | | rst, Middle): |
| | | |
| Tharp, Steven A. Sr. All Other Names used by the Debtor in the last 6 years | All Other Names us ad by the Jaint Debte | or in the left 6 years |
| 1 | All Other Names used by the Jaint Debto (include married, maiden, and trade nam | |
| · · · · · · · · · · · · · · · · · · · | Last four digits of Soc. Sec. No./Complet (if more than one, state all): | te EIN or other Tax I.D. No. |
| T T | Street Address of Joint Debtor (No. & Sti | reet, City, State & Zip Code): |
| County of Residence or of the | County of Residence or of the | |
| | Principal Place of Business: | |
| Mailing Address of Debtor (if different from street address): | Mailing Address of Joint Debtor (if differe | ent from street address): |
| Location of Principal Assets of Business Debtor (If different from addresses listed above): | | |
| Venue (Check any applicable box) Example 2 | such 180 days than in any other District | |
| l ξ Individual(s) 0 Railroad | Chapter or section of Bankru | uptcy Code Under Which |
| 0 Corporation 0 Stockbroker | the Petition is Filed | |
| 0 Commodity Broker | ξ Chapter 7 o Chapter 11 | o Chapter 13 |
| 0 Other 0 Clearing Bank | o Chapter 9 o Chapter 12 | |
| Nature of Debts (Check one box) | 0 Sec. 304 - Case anaillary to foreign | n proceeding |
| Consumer/Non-Business 0 Business | Filing Fee (Che | eck one box) |
| Chapter 11 Small Business (Check all boxes that apply) | ξ Full Filling fee attached | n (Applicable to individ |
| Debtor is a small business as defined in 11 U.S.C. § 101 Debtor is and elects to be considered a small business under | I o Filing Fee to be paid in installment uals only) Must attach signed a | • • • |
| 11 U.S.C. § 1121(e) (Optional) | consideration certifying that the | • • |
| | fee except in installments. Rul | ' ' |
| Statistical/Administrative Information (Estimates only) 0 Debtor estimates that funds will be available for distribution to unsecure 0 Debtor estimates that, after any exempt property is excluded and admin | d creditors. | PACE IS FOR COURT USE ONLY |
| paid, there will be no funds available for distribution to unsecured a | 1 | |
| Estimated Number of Creditors | 99 200-999 1000-Over 0 0 | |
| Estimated Assets | [| |
| \$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001 | to \$50,000,001 to More than | |
| \$50,000 \$100,000 \$500,000 \$1 million \$10 million \$50 million | \$100 million \$100 million | |
| | 0 0 | |
| Estimated Debts contact the contact to contact the contact to contact the | \$50,000,001 to Mara the:- | |
| \$0 to \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001 to \$500,000 \$100,000 \$500,000 \$1 million \$10 million \$50 million | \$50,000,001 to More than \$100 million \$100 million | |
| <u> </u> | 0 0 | |

| fficial Form 1) (12,03) Voluntary Petition | Name of Debtor(s): | FORM B 1 , Pc |
|--|-------------------------------------|---|
| his page must be completed and filed in every case.) | Tharp, Steven A. Sr. | |
| Prior Bankruptcy Case Filed Within Last | 6 Years (If more than one, a | attach padattional sheet) |
| ocation . , | Case Number: | Date Filed: |
| /here Filed: | 1 | |
| ending Bankruptcy Case Filed by any Spouse, Partner or A | ffiliate of this Debtor (If ma | ore than one, attach additional sheet) |
| lame of Debtor: | Case Number: | Date Filed: |
| | 1 | |
| oistrict: | Relationship: | Judge: |
| | Radia si ip. | l dage. |
| Cian | oftures | <u>-</u> |
| | | F |
| Signature(s) of Debtor(s) (Individual/Joint) | | Exhibit A |
| declare under penalty of perjury that the information provided in | | otor is required to file periodic reports |
| nis petition is true and correct. | |)Q) with the Securities and Exchange |
| f petitioner is an individual whase debts are primarily consumer | | o Section 13 or 15(d) of the Securitie |
| lebts and has chosen to file under chapter 7). I am aware that | Exchange Act of 1934 of | and is requesting relief under chap. 1 |
| may proceed under chapter 7, 11, 12 or 13 of title 11, United | 1 | |
| tates Code, understand the relief available under each such | o Exhibit A is attached and | d made a part of this petition. |
| napter, and choose to proceed under chapter 7. | | |
| request relief in accordance with the chapter of title 11, United | | Exhibit B |
| tates Code, specified in this petition. | (To be complete | ed if debtor is an individual |
| | · · | e primarily consumer debts) |
| (<u>/s/Steven A. TharpSr.</u> | | oner named in the foregoing petition, |
| Signature of Debtor | | d the petitioner that (he or she) may |
| signalate of Debio | | 1, 12, or 13 of title 11, U.S.C, and |
| (<u>/</u> \$/ | | ef available under each such chapter. |
| Signature of Joint Debtor | and have explained the relie | ei available under each sud i dilapier. |
| Signature of Joint Deptor | 1 | |
| | V / / Obada Hara A Jalana | 0.00.05 |
| | X <u>/s/Christine A. John</u> | ns on 9/22/05 |
| Telephone Number (If not represented by attorney) | Signature of Attorney fo | or Debtor(s) Date |
| 9/22/05 | 1 | |
| Date | | |
| Signature of Attorney | | Exhibit C |
| | Does the debtor own or hav | ve possession of any property that |
| (/s/Christine A. Johnson | poses or is alleged to pose a | a threat of imminent and identifiable |
| Signature of Attorney for Debtor(s) | harm to public health or safe | ety? |
| Christine A. Johnson | | hed and made a part of this petition. |
| Printed Name of Attorney for Debtar(s) | ξ No | |
| Law Office of Christine A. Johnson | | Attorney Petition Preparer |
| Firm Name | | atcy petition preparer as defined in |
| 4096 Holiday Street NW | 11 U.S.C. & 110 that Large | pared this document for compensation |
| Address | | e debtor with a copy of this document |
| Canton, OH 44718 | Talaliai i nave provided ine | e debidi wiiit d copy of Itilis document |
| <u>Cariiori, On 44710</u> | | |
| (220) 400 4411 | | I D III D |
| (330) 498-4411 | Printed Name of Bankrup | orcy Pellillon Preparer |
| Telephone Number | | D |
| 9/22/05 | Social Security Number (I | Required by 11 U.S.C § 110(c).) |
| Date | | |
| Signature of Debtor (Corporation/Partnership) | Address | |
| | l | |
| declare under penalty of perjury that the information provided in | 1 | |
| nis petition is true and correct, and that I have been authorized to | | ity numbers of all other individuals |
| le this petition on behalf of the debtor. | who prepared or assisted | I in preparing this document: |
| he debtor requests relief in accordance with the chapter of title | | |
| 1, United States Code, specified in this petition. | | |
| • | If more than one person in | prepared this document, attach |
| | | ning to the appropriate official form fo |
| | each person. | |
| | 1 | |
| Signature of Authorized Individual | x | |
| Organica Or / Millionzod in Milliond | Signature of Bankruptcy F | Petition Premorer |
| Printed Name of Authorized Individual | | |
| THE TRUTTE OF AUTHORIZED ITHUSIONAL | Doto. | |
| Title of Authorized leady in the | Date | rort afailure to sementic the Heart |
| Title of Authorized Individual | | rer' sfailure to comply with the pro- |
| | | ederal Rules of Bankr. Procedure ma ent or both 11 USC §110; 18 USC §1 |
| Date | | |

FORM B6 - Cont. (6/90)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO

| In re Tharp, Steven A. Sr. | Case No. | |
|----------------------------|----------|------------|
| Debtor | | (If known) |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, C, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor' sassets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor' sliabilities.

| | + | + | 1 | AMOUNTS SCHEDUL | ED |
|---|----------------------|----------------------|---------------------|---------------------------------------|-----------|
| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | I LIABILITIES | OTHER |
| A - Real Property | l Yes | 1 | \$ 0.00 | | <u> </u> |
| B - Personal Property | Yes |] 3 | 6,655.05 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 9,905.61 | |
| E - Creditors Holding Unsecured Priority Claims | Yes | 3 | | 709.82 | |
| - Creditors Holding Unsecured Nonpriority Claims | Yes | 5 | | 34,188.48 | |
| G - Executory Contracts and Unexpired Leases | l Yes | 1 <u> </u> | | | |
| H - Codelotors | l l Yes l | 1 | | | |
| - Current Income of Individual Debtor(s) | l Yes | 1 | | | 1,539.36 |
| J - Current Expenditures of Individual Debtor(s) | l Yes | 1 | | | 2,455.45 |
| Total Number of of ALL Scher | | | | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | |
| | Total As | s ets ™ | 6,655.05 | | |
| | | | Total Liabilities ™ | 44,803.91 | |

| FORM B6A (6/90) | |
|----------------------------|---------|
| In re Tharp, Steven A. Sr. | Case No |

Debtor

| _/ | |
|----|------------|
| | (If known) |

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whetherhusband, wife, or both own the property by placing an "H," "W", "J," or "C" in the column labeled "Husband, Wife, Jaint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity daims to have a lien or hold a secured interest in any property, state the amount of the secured daim. See Schedule D. If no entity daims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption daimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | H W J C | CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--------------------------------------|--|------------------------------|---|----------------------------|
| Real Estate | None | | | |
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0 continuation sheets attached

| FORM B6E |
|----------|
| (10/89) |
| |

| In re Tharp, Steven A. Sr. | , Case No | |
|----------------------------|-----------|------------|
| Debtor | | (If known) |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions a daimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person' sname and address under "Description and Location of Property."

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | H W J or | CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|--------------------------|--|--------------------------|--|
| II. Cash on hand. | | Cash on hand. | | 200.00 |
| 2. Checking, savings or other financial accounts, bertificates of deposit, or shares in banks, avings and loan, thrift, building and loan, and homestead associations, or arealt unions, brokerage houses, or cooperatives. | | National City and Brewster Federal Creat Union | | 5.05 |
| B. S ecurity deposits with public utilities, telephone companies, landords, and others. | İx İ | | | 0.00 |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | | Hous ehold goods. | | 250.00 |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact alsc, and other collections or collectibles. | x | | | 0.00 |
| 6. Wearing apparel. | | Wearing apparel. | | 200.00 |
| 7. Furs and jewelry. | ļx | Mis cellaneous Jewelry | | 0.00 |
| 8. Firearms and sports, photographic, and other hobby equipment. | lx I | | | 0.00 |
| 9. Interests in insurance policies. Name Insurance company of each policy and itemize surrender or refund value of each. | x | Life insurance. | | 0.00 |
| 10. Annuities . Itemize and name each issuer. | İx | - | į į | 0.00 |
| I.1. Interests in IRA, ERISA, Keogh, or other bension or profit sharing plans. Itemize. | lx I | | | 0.00 |
| 12. Stock and interests in incorporated and | <u>l</u> x | <u> </u> | <u></u> | 0.00 |

2____ continuation sheets attached

| • | | | |
|-----|----------------|------|-------|
| FC | N SC | RAR. | -Cont |
| | | | COLI |
| (IL |) <i>(</i> 89) | | |

| In reTharp, Steven A. Sr. | , Case No. | |
|---------------------------|------------|------------|
| Debtor | | (If known) |

SCHEDULE B - PERSONAL PROPERTY - CONTINUATION PAGE

| I | 1 | I | 1 | 1 |
|---|--------------------|--|------------------------|---|
| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | H W J or C | CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| unincorporated businesses. Itemize. | | | | |
| | l x | | | |
| 14. Government and corporate bonds and other negotiable and nonnegotiable instruments. | lx I | | | 0.00 |
| 15. Accounts receivable. | İx | | į | 0.00 |
| 16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | x | | | 0.00 |
| 17. Other liquidated debts owing debtor including tax refunds. Give particulars. | lx I | Tax refund. | | 0.00 |
| 18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than that e listed in Schedule of Real Property. | x | | | 0.00 |
| 19. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | x | | | 0.00 |
| 20. Other contingent and unliquidated daims of every nature, including tax refunds, counterdaims of the debtor, and rights to setoff daims. Give estimated value of each. | x | Personal Injury daim not induding pain and suffering. | | 0.00 |
| 21. Patents, copyrights, and other intellectual property. Give particulars. | lx I | | | 0.00 |
| 22. Licenses, franchises, and other general intangibles. Give particulars. | lx I | | | 0.00 |
| 23. Automobiles , trucks , trailers , and other vehicles . | | 2000 Chevrolet Blozer | | 6,000.00 |
| 24. Boats, motors, and accessories. | ļχ | | | 0.00 |
| 25. Aircraft and accessories. | ļx | | | 0.00 |
| 26. Office equipment, furnishings, and supplies. | _X | | <u> </u> | 0.00 |
| | | Total \$ | | |

Sheet no. $\underline{1}$ of $\underline{2}$ continuation sheets

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

| FORM | B6B-Cont. |
|-------------|-----------|
| (10/89) | |

| In reTharp, Steven A. Sr. | , | Case No. | |
|---------------------------|----------|-------------|--|
| Dobtor | <u> </u> | (If Imau n) | |

SCHEDULE B - PERSONAL PROPERTY - CONTINUATION PAGE

| | | ı | | |
|--|------------------|--------------------------------------|------------------------|---|
| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | H W J or C | CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| 27. Machinery, fixtures, equipment and supplies us ed in business. | x | Tools of trade. | | 0.00 |
| 28. Inventory. | İx | | <u> </u> | 0.00 |
| 29. Animals. | ļx | | ! | 0.00 |
| 30. Crops-growing or harvested. Give particulars. | İx | | ! | 0.00 |
| 31. Farming equipment and implements. | İx | | ! | 0.00 |
| 32. Farm supplies, chemicals, and feed. | ļx | | ! | 0.00 |
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| <u> </u> | <u> </u> | Total \$ | <u> </u> | 6,655.05 |

Sheet no. 2 of 2 continuation sheets

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

| FORM | B ₆ C |
|-------------|------------------|
| (6/90) | |

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| In re Tharp, Steven A. Sr. | _, | Case No. | |
|----------------------------|---------------|----------|------------|
| Debtor | ' | | (If known) |

SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

0

11 U.S.C. § 522(b)(1): Exemption provided in 11 U.S.C. § 522(d). Note: These exemptions are available only in certain states. 11 U.S.C. § 522(b)(2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filling of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as denant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

| S PECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT MARKET VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|--|---|---|
| R.C. 2329.66(A)(4)(a) | 200.00 | 200.00 |
| R.C. 2329.66(A)(4)(a) R.C. 2329.66(A)(4)(b) | 5.05 | 5.05 250.00 |
| R.C. 2329.66(A)(3) | 200.00 | 200.00 |
| R.C. 2329.66(A)(2) | 1,000.00 | 6,000.00 |
| R.C. 2329.66(A)(2) | 0.00 | 500.00 |
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| | EXEMPTION R.C. 2329.66(A)(4)(a) R.C. 2329.66(A)(4)(b) R.C. 2329.66(A)(4)(b) & (c) R.C. 2329.66(A)(3) R.C. 2329.66(A)(2) | EXEMPTION EXEMPTION R.C. 2329.66(A)(4)(a) 200.00 R.C. 2329.66(A)(4)(a) 5.05 R.C. 2329.66(A)(4)(b) 250.00 & (c) R.C. 2329.66(A)(3) R.C. 2329.66(A)(2) 1,000.00 |

__continuation sheets attached

| FORM B6D (12,03) | |
|----------------------------|----|
| In re Tharp, Steven A. Sr. | ., |
| Debtor Debtor | - |

| Case No | |
|---------|------------|
| | (If known) |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding daims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a daim, place an "X" in the column labeled "CODEBTOR," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each daim by placing an "H," "W," "J," or "C" in the column labeled "H, W, J, or C."

them, or the marital community may be liable on each daim by placing an "H," "W," "J," or "C' in the column labeled "H, W, J, or C."

If the daim is contingent, place an "X" in the column labeled "CONTING." If the daim is unliquidated, place an "X" in the column labeled "UNLIQ."

If the daim is disputed, place an "X" in the column labeled "DISPUTED." (You may need to place an "X" in more than one of these three columns.)

Report in total of all daims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

O Check this box if debtor has no areators holding secured daims to report on this Schedule D.

| | | | | | | | | • |
|--------------------------------|----------|----------|--------------------------|----------|-------------------|----------|-----------------|------------|
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| CREDITOR'S NAME AND | D | W | DATE CLAIM WAS INCURRED, | ļΝ | ļΝ | ls | OF | |
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| INCLUDING ZIP CODE | lΒ | lar | DESCRIPTION AND MARKET | lт | lι | lυ | WITHOUT | PORTION, |
| AND ACCOUNT NUMBER | ļτ | lс | VALUE OF PROPERTY | ĺΝ | la | lτ | DEDUCTING | IF ANY |
| (See instructions above.) | lo | | SUBJECT TO LIEN | lG | | ļΕ | VALUE OF | |
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| ACCOUNT NO. 2850082 | | | 2000 Chevrolet Blozer | | | | | |
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| | | | (Use only or | n lost | bage | ∋) | \$ 9,905.61 | I |

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| Form B6E | | |
| (12,03) | | |
| | O N | |
| In re <u>Tharp, Steven A. Sr.</u> | Cas e No | |
| Debtor | | (If known) |

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name and mailing address, including zip code, and lost four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filling of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so.

If any entity other than a spouse in a joint case may be jointly liddle on a daim, place an "X" in the column labeled "CODE BT OR," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each daim by placing an "H," "W," "J," or "C" in the column labeled "H, W, J, or C."

If the daim is contingent, place an "X" in the column labeled "CONTING." If the daim is unliquidated, place an "X" in the column labeled "UNLIQ." If the daim is disputed, place an "X" in the column labeled "DISPUTED." (You may need to place an "X" in more than one of these three columns.)

Report the total of daims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all daims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

O Check this box if debtor has no creditors holding unsecured priority daims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if daims in that category are listed on the attached sheets)

O Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business offinancial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

0 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,650* per person earned within 90 days immediately preceding the filing of the original petition, or the cess attion of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

O Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

O Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$4,650* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

O Deposits by individuals

Claims of individuals up to \$2,100* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

| • |
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| Form B6E |
| (12/03) |
| |

| In re <u>T harp, S teven A. Sr.</u> , Cas e No, Debtor (if known) | |
|--|---------|
| ξ Alimony, Maintenance, or Support | |
| Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(0) Taxes and Certain Other Debts Owed to Governmental Units | (7). |
| Taxes, customs duties, and pendities owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution | |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Gov of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(| |
| * Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the adjustment. | date of |
| | |
| | |
| | |
| | |
| 1 continuation sheets attached | |

| FORM B6E | - Cont. |
|----------|---------|
| (12/03) | |

| In reTharp, Steven A. Sr. | , Cas e No. | | |
|---------------------------|-------------|--|------------|
| Debtor | | | (if known) |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation S heet)

Alimony, maintenance, or support

TYPE OF PRIORITY

| MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER | l _D | H W J or C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | _N _T ₁ | N L Q | D S P U T | T OT AL AMOUNT OF CLAIM | AMOUNT ENTITLED TO PRIORITY |
|---|-------------------------------|------------------------|---|--|--|-----------------------|-------------------------------|--------------------------------------|
| ACCOUNT NO. 1997DR01433 Kelly E. Tharp c/o Stark County Child Support Enforcement Agency 116 Cleveland Ave., NE Canton, OH 44702 | | | 1997 - childs upport | | | | 709.82 | 709.82 |
| ACCOUNT NO. | | | | | | | | |
| ACCOUNT NO. | | | | | <u> </u> | | | |
| ACCOUNT NO. | | | | | | | | |
| ACCOUNT NO. | | | | | | | | |
| Sheet no. <u>1</u> of <u>1</u> sheets Credtors Holding Priority Claims | | | to Schedule of (Total of th | otal | де) тм | · | 709.82 709.82 | |

| FORM B6F (12/03) | | | |
|----------------------------|---|-----------|------------|
| In re Tharp, Steven A. Sr. | , | Cas e No. | |
| Debtor | | | (if known) |

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured daims without priority against the debtor or property of the debtor, as of the date of filling of the petition. The complete account number of any account of the debtor has with the areaftor useful to the trustee and the areaftor and may be provided if the debtor chooses to do so. Do not include daims listed in Schedules D and E. If all areaftors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a daim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each daim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint or Community."

If the daim is contingent, place an "X" in the column labeled "CONTING." If the daim is unliquidated, place an "X" in the column labeled "UNLIQ." If the daim is disputed, place an "X" in the column labeled "DISPUTED." (You may need to place an "X" in more than one of these three columns.)

Report total of all daims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

0 Check this box if debtor has no creditors holding unsecured daims to report on this Schedule F.

| | _ | | | | | | |
|-----------------------------------|----------|---------------------|------------------------------|------------------|---------|---------|-------------|
| | lc lo | T I _H | | lc lo | T lu | D I | |
| CREDITOR'S NAME AND | ĺр | ĺw | DATE CLAIM WAS INCURRED | ĺΝ | ĺΝ | Ϊs | j |
| MAILING ADDRESS | ĺΕ | IJ | AND CONSIDERATION FOR CLAIM. | ĺτ | ĺμ | ĺΡ | AMOUNT |
| INCLUDING ZIP CODE | 1 | lor | IF CLAIMIS SUBJECT TO | - li | Ιī | ĺυ | OF CLAIM |
| AND ACCOUNT NUMBER | ĺτ | lс | SETOFF, SOSTATE. | ΪN | ΪQ | ĺτ | |
| (See instructions above.) | ĺо | Ĭ |] | ΪĠ | Ĭ | ΪΕ | İ |
| | İR | İ | İ | ĺ | İ | ĺБ | İ |
| ACCOUNT NO. 23989337 | | | Misc | _ _ | | | |
| Asset Acceptance | | | | ļ | | | |
| POB 2036 | | | | | | | |
| Warren MI 44090 | | | | | | | 3,796.36 |
| | | | | | | | |
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| | | <u> </u> | | | | <u></u> | |
| ACCOUNT NO. 5178052170071225 | | | Mis c. | | | | |
| Capital One Bank | | | | | | | |
| POB 790216 | | | | | | | |
| St. Louis MO 63179-0216 | | | | | | | 3,082.97 |
| | | | | | | | |
| | | | | | | | |
| | | <u></u> | | _ | | | <u> </u> |
| ACCOUNT NO. 025757004 | | | Medical | | | | |
| Credit Bureau of Stark County Inc | | | | | | | |
| POB 2714 | | | | | | | |
| N. Canton OH 44720-0714 | | | | | | | 303.50 |
| | | | | | | | |
| | | | | | | | |
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| | | | | Suk | ototal | тм | |
| 4 continuation sheets attached | | | | | | | \$ 7,182.83 |
| | | | | | T otal | TM | \$ |

| n re <u>Thorp, Steven</u> A. Sr. | Case No. | | |
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| Debtor | | (If known) | |

(Continuation Sheet)

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| CREDITOR'S NAME AND | ļο | lw | DATE CLAIM WAS INCURRED | ļΝ | ļΝ | ļs | |
| MAILING ADDRESS | ļΕ | IJ | AND CONSIDERATION FOR CLAIM. | ļτ | ļL | ļΡ | AMOUNT |
| INCLUDING ZIP CODE | В | or | IF CLAIMIS SUBJECT TO | ļı | ļi | ļυ | OF CLAIM |
| AND ACCOUNT NUMBER | lτ | lc | SETOFF, SO STATE. | In | Q | lτ | |
| (See instructions.) | Ю | | | lG | | lΕ | |
| | IR | | | | | | |
| ACCOUNT NO. 025757004 | <u> </u> | | Medical | | | ! | |
| Credit Bureau of Stark County Inc | ! | ! | | ! | ļ | ! | ļ |
| POB 2714 | ļ | ļ | ļ | ļ | ļ | ļ | <u> </u> |
| N. Canton, OH 44720-0714 | | | | | | | 303.50 |
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| | _ | \perp | | | <u> </u> | | |
| ACCOUNT NO. 550624109 | - | ! | Misc. | ļ | 1 | ! | ļ |
| Credit First NA | ! | ! | | ! | ! | ! | |
| POB 81344 | ! | ! | | ! | ļ | ! | ļ |
| Cleveland OH 44188-0344 | ļ | ļ | ļ | ļ | ļ | ļ | 524.34 |
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| I | | \vdash | | - | ┞ | \vdash | <u> </u> |
| ACCOUNT NO. | - ¦ | 1 | 12005 | - | ! | ¦ | ! ! |
| ICS AHS-UHHS Cantan, Inc. | - | ! | | - | 1 | ! | |
| IPO Box 951081 | - | ! | | - | ! | ! | ! ! |
| Cleveland, OH 44193 | - | ! | | - | ! | ! | 500.00 |
| | - | ! | | - | ļ | ! | |
| | - | | | - | | | |
| ACCOUNT NO. | _ | 亡 | Acct. Nos. 1668520, 1658187, 1659074, | −†− | 亡 | 亡 | İ |
| Doctor's Hospital of Stark County | | | 1656607, 1639368, 1602173, 1549556, and | | | | |
| POB 901853 | | | 11190411 | | | | |
| Cleveland OH 44190-1853 | | 1 | | | 1 | | 16,213.21 |
| | | 1 | | | | | · |
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| | | <u></u> | | | <u></u> | | |
| ACCOUNT NO. 16566071 | _ | ! | Medical | ļ | | ! | |
| Doctors Hospital | ļ | ! | | ļ | ļ | ! | ! |
| POB 901853 | ļ | ļ | ļ | ļ | ļ | ! | ! |
| Cleveland, OH 44190-1853 | | | | | | | 14.52 |
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| | | | | Sub | total | тм | |
| Sheet no. 1 of 4 sheets attac | hed to | Sche | adule of (Tot | al of this | pag | e) | \$ 17,555.57 |
| Creditors Holding Unsecured Nonpriorit | y Clair | ∩s | | | TAL | | |
| | | | (Use only on last page of the comple | ted S ch | edule | E.) | <u>l</u> \$ |

| In re Tharp, Steven A. Sr. | Case No. | |
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| Debtor | | (If known) |

(Continuation Sheet)

| CREDIT OR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER (See instructions.) | C O D E B T O R | H W J Or C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SET OFF, SO STATE. | | | | AMOUNT OF CLAIM |
|--|-------------------------------|---------------------------|--|--------------------------|---------------------|--------------------------|-------------------------------|
| ACCOUNT NO. 16590741 Doctors Hospital POB 901853 Cleveland, OH 44190-1853 | _ _ | | Medical | | | | |
| ACCOUNT NO. M1118197 EMP of Stark County Ltd POB 714464 Calumbus, OH 43271-4464 | _ | - | Medical | | | | 186.00 |
| ACCOUNT NO. 131417204 Masillon Community Haspital POB 74864 Cleveland, OH 44194-4864 | _ | | Medical | | | | 10.00 |
| ACCOUNT NO. Massillon Health Systems, LLC POBox 901853 Cleveland, OH 44190 | - | | | | | | 500.00 |
| ACCOUNT NO. 11797 Modern Health Alternatives 276 Federal Ave NW Massillon OH 44647 | | | Acct Nos. 11826 & 11797 | | | | 707.03 |
| Sheet no. <u>2</u> of <u>4</u> sheets atta Creditors Holding Unsecured Nonpriori | | | | of this | OT AL | је) тм | \$ 1,406.82 |
| | | | (Use only on lost page of the complete | dSdh | nedule | ∋E.) | <u>IŞ</u> |

| In re <u>Tharp, Steven A. Sr.</u> | Case No. | | |
|-----------------------------------|----------|--|------------|
| Debtor | | | (If known) |

(Continuation Sheet)

| CREDIT OR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER (See instructions.) | H W J or C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SET OFF, SO STATE. | | U N L Q | | AMOUNT OF CLAIM |
|--|--------------------------|--|---------|--------------------------|--------------------------|----------------------------|
| ACCOUNT NO. H02031183110 NCO Financial Systems Inc POB 13570 Philadelphia, PA 19101-3570 | | Medical | | | | 48.50 |
| ACCOUNT NO. 16590741 Professional Claims Management POB 35276 Canton OH 44735-5276 | | Medical | | | | 15.15 |
| ACCOUNT NO. 4185864256593557 Providan POB 660487 Dallas TX 75266-0487 | | Mis c. | | | | 730.74 |
| ACCOUNT NO. Radialogy and Imaging Service POBox 931286 Cleveland, OH 44193 | | | | | | 500.00 |
| ACCOUNT NO. Radiology Assoc. of Canton, Inc. 3333 Arlington Road Akron, OH 44312 | | | | | | 200.00 |
| Sheet no. <u>3</u> of <u>4</u> sheets attact Creditors Holding Unsecured Nonpriority | | | of this | T AL | е) тм | \$ 1,494.39 |
| | | (Use only on last page of the completed | dSch | edule | ∍E.) | <u>I\$</u> |

| In re Tharp, Steven A. Sr. | _, | Case No. | |
|----------------------------|----|----------|------------|
| Debtor | | | (If known) |

(Continuation Sheet)

| MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER | D E B | H J or C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SET OFF, SO STATE. | ln It Iı | | | Amount Of Claim |
|--|--------------------------|-------------------------------|--|--------------------------|---------------------|-------|-------------------------------------|
| ACCOUNT NO. 1000509057 S peedway S uperAmerica LLC 500 S peedway Dr Enon OH 45323 | | | Mis c. | | | | 370.67 |
| ACCOUNT NO. 3862917 The HMC Group 837 Crocker Rd. Westlake OH 44145-1028 | | | Medical | | | | 2,089.20 |
| ACCOUNT NO. 4318255405720376218 United Personnel & Adjustment Bureau Inc 306 Market Ave. N Suite 1012-1015 Canton OH 44702 | | | Medical | | | | 2,000.00 |
| ACCOUNT NO. 2005-CVF-3193 Doctor's Hospital c/o Massillon Municipal Court Two James Duncan Plaza Massillon, OH 44646 | | | medical | | | | 2,089.00 |
| ACCOUNT NO. | | | | | | | |
| S ubtotal ™ | | | | | | | |
| Sheet no. 4 of 4 sheets attached | | | dule of (T otal o | | _ | | \$ 6,548.87 |
| Creditors Holding Unsecured Nonpriority Claims TOTAL™ | | | | | | l | |
| (Use only on lost page of the completed Schedule E.) $\frac{1}{2}$ 34,188.48 | | | | | | | |

| B6G (10/89) | |
|-----------------------------------|---------------|
| In re <u>Tharp, Steven A. Sr.</u> | Cas e No. |

| Case No. | | |
|----------|------------|--|
| | (if known) | |

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any times have interests.

State nature of debtor's interest in contract, i.e., "Purchaser," Agent," etc. State whether debtor is the less or or less ee of a lease.

Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOT E: A party listed on this schedule will not receive notice of the filling of this case unless the party is also scheduled in the appropriate schedule of creditors.

 ξ Check this box if debtor has no executory contacts or unexpired leases.

Debtor

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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0 continuation sheets attached

| В6Н (6/90) | |
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| In re <u>Tharp, Steven A. Sr.</u> , | Cas e No |
| Debtor | (if known) |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spause in a joint case, that is also liddle on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filling a joint case should report the name and address of the nondebtor spause on this schedule. Include all names used by the nondebtor spause during the six years immediately preceding the commencement of this case.

 ξ Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
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0 continuation sheets attached

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| (12/03) | |

| n re Tharp, Steven A. Sr. | , Cas e No. | |
|---------------------------|-------------|------------|
| Debtor Debtor | • | (if known) |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

| Debtor's Marital | | NIDENTA CE | DEDT OD 4415 05 00 | 10.5 | | |
|-----------------------------------|--|------------|-----------------------|-------------|------|--|
| Status: | | NDENTS OF | OF DEBT OR AND SPOUSE | | | |
| | NAMES | | AGE | RELATI | | |
| Divoræd | Courtney Thorp | 17 | | Daughter | | |
| | Cody Tharp | | 14 | Son | | |
| | Chad Tharp | | 12 | Son | | |
| | l Rory Gallion | | 16 | <u>ISon</u> | | |
| E mployment | DE BT OR | | | SPOUSE | | |
| | rator | | <u> </u> | | | |
| | wster Dairy Inc. | | | | | |
| How long employed: 18 ye | | | | | | |
| Address of Employer: 675: Brev | S. Watash vster, OH 44613 | | | | | |
| | | | | | | |
| Income: (Estimate of ave | | | DEBTOR | SP | OUSE | |
| (pro rate if not paid m | ges, salary, and commissions | \$ | 2,345.60 | \$ | 0.00 | |
| Estimated monthly overtin | | \$ | 0.00 | \$ | 0.00 | |
| L3 III MICATTO III II V OVOI III | | ř | 0.00 | <u> </u> | 0.00 | |
| SUBTOTAL | | İ\$ | 2,345.60 | \$ | 0.00 | |
| | | | | | | |
| LESS PAYROLL DEDU | | • | | • | | |
| a. Payroll taxes and so | dal security | \$ <u></u> | 535.84 | \$ | 0.00 | |
| b. Insurance | | \$ | 111.86 | \$ | 0.00 | |
| c. Union dues | | \$ <u></u> | 0.00 | \$ | 0.00 | |
| d. Other (Specify: <u>401(k</u> |) | \$ | 158.54 | \$ | 0.00 | |
| SUBTOTAL OF PAYRO | DLL DE DUCTIONS | İ\$ | 806.24 | \$ | 0.00 | |
| TOTAL NET MONTHLY T | AKE HOME PAY | İ\$ | 1,539.36 | \$ | 0.00 | |
| Regular income from oper | ration of business or profession or form | \$ | 0.00 | \$ | 0.00 | |
| (attach detailed statement | | | | | | |
| Income from real property | | \$ | 0.00 | \$ | 0.00 | |
| Interest and dividends | | \$ | 0.00 | \$ | 0.00 | |
| Alimony, maintenance or s | support payments payable to the debtor | | | | | |
| | at of dependents listed above. | \$ | 0.00 | \$ | 0.00 | |
| Social security or other go | • | • | | * | | |
| (Specify) | WOTHER HOUSE IN THE | \$ | 0.00 | \$ | 0.00 | |
| Pension or retirement inco | nmo. | \$ \$ | 0.00 | <u>~</u> | 0.00 | |
| | JIIC | <u>ې</u> | 0.00 | <u>ې</u> | 0.00 | |
| Other monthly income | | 6 | | ^ | | |
| (Specify) | | \$ | 0.00 | \$ | 0.00 | |
| | | Ş | 0.00 | \$ | 0.00 | |
| TOTAL MONTHLY INCOM | ME | İ\$ | 1,539.36 | \$ | 0.00 | |

1,539.36 Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filling of this document.

| Form | B6J |
|--------|-----|
| (6/90) |) |

| In reTharp, Steven A. Sr. | , Co | as e No. |
|---------------------------|------|------------|
| Debtor | _ | (if known) |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments madebiweekly, quarterly, semi-annually, or annually to show monthly rate.

O Check this box if a joint petition is filed and debtor's spouse mitintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

| Dont or home martages payment (in | dudo lat roptod fo | r mobile home) | \$ | 400.00 |
|--|---------------------|---|---|-------------------|
| Rent or home mortgage payment (in | | | \$ <u></u> | 400.00 |
| Are real estate taxes included? | Yes | No X | | |
| Is property insurance included? Utilities Electric and heating fuel | Yes | No <u>X</u> | \$ | 0.00 |
| Utilities Electric and heating fuel Water and sewer | | | \$ \$ | 0.00 |
| | | | \$ \$ | 0.00 |
| T elephone Other | | | \$ \$ | 50.00 0.00 |
| Home maintenance (repairs and upk | | | <u> </u> | 0.00 |
| Food | cop) | | \$\$ | 300.00 |
| Clothing | | | \$ <u></u> | 50.00 |
| Laundry and dry deaning | | | \$\$ | 30.00 |
| Medical and dental expenses | | | \$\$ | 90.00 |
| Transportation (not including paymer | nte) | | \$ <u></u> | 300.00 |
| Recreation, dubs and entertainment | | onzines etc | \$ <u></u> | 25.00 |
| Charitable contributions | , nowapapara , ma | gazin ico , cic. | \$ <u></u> | 0.00 |
| Insurance (not deducted from wages | ar induded in har | me mortaane navments) | * | |
| Homeowner's or renter's | | To mongage paymente | \$ | 0.00 |
| Life | | | \$ | 0.00 |
| Health | | | \$ | 0.00 |
| Auto | | | \$ | 119.57 |
| Other | | | \$ | 0.00 |
| Taxes (not deducted from wages or i | nduded in home r | mortgage payments) | | |
| (Specify) | | | \$ | 0.00 |
| Installment payments: (In chapter 12 | and 13 cases, da | not list payments to be included in the plan) | | |
| Auto | | | \$ | 381.06 |
| Other | | | \$ | 0.00 |
| Other | | | \$ | 0.00 |
| Alimony, maintenance, and support p | caid to others | | \$ | 709.82 |
| Payments for support of additional de | ependents not livir | ng at your home | \$ | 0.00 |
| Regular expenses from operation of | business, professi | on, or far (attach detailed statement) | \$ | 0.00 |
| Other | | | \$ | 0.00 |
| | | | | |
| | | | ! | |
| TOTAL MONTHLY EXPENSES (Rep | oort also on Summ | nary of Schedules) | <u>l \$</u> | 2,455.45 |
| (FOR CHAPTER 12 AND 13 DEBTC | ORS ONLY) | | | |
| , | • | ether plan payments are to be made bi-weekl | ly, monthly, annually, or at sc | ome other regular |
| interval. | | . , , | , | |
| A. Total projected monthly income | | | \$ | 0.00 |
| B. Total projected monthly expense | S | | \$ | 0.00 |
| C. Excess income (A minus B) | | | \$ | 0.00 |
| D. Total amount to be paid into plan | each | | \$ | 0.00 |

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(interval)

| • | | | |
|-----------------------------------|---|----------|------------|
| Official Form B6-Cont. | | | |
| (12,03) | | | |
| | | | |
| In re <u>Tharp, Steven A. Sr.</u> | , | Case No. | |
| Dehtor | | | (If known) |

DECLARATION CONCERNING DEBT OR'S SCHEDULES

| DE CLARATION CONCERT | | |
|---|--------------------------------|---|
| DECLARATION UNDER PENALT | A OF BEKJOKA BA INDIAI | DUAL DEBTOR |
| I declare under pendity of perjury that I have read the foregoing su and that they are true and correct to the best of my knowledge, information ${\bf r}$ | | sisting of 19 sheets, (Total shown on summary page plus 1.) |
| Date | Signature: <u>/s/S</u> | teven A. Thorp Sr. Debtor |
| Date | | (Joint Debtor, if any) f joint case, both spouses must sign.) |
| CERTIFICATION AND SIGNATURE OF NON-ATTORNE | Y BANKRUPT CY PETITIC | ON PREPARER (See 11 U.S.C. § 110) |
| I certify that I am a bankruptcy petition preparer as defined in 11 U.S. provided the debtor with a capy of this document. | C. § 110, that I prepared th | is document for compensation, and that I have |
| Printed or Typed Name of Bankruptcy Petition Preparer | | d Security No. uired by 11 U.S.C. § 110(c).) |
| Address Names and Social Security numbers of all other individuals who prepare | ed or assisted in preparing t | his document: |
| If more than one person prepared this document, attach additional signs | edsheets conforming to the | appropriate Official Form for each person. |
| X | | Date |
| A bankruptcy petition preparer's failure to comply with the provisions of Imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. | title 11 and the Federal Rul | es of Bankruptcy Procedure may result in fines or |
| DECLARATION UNDER PENALTY OF PERJUR | Y ON BEHALF OF COR | PORATION OR PARTNERSHIP |
| I, the (the president or other agent of the partnership) of the <u>Tharp, Steven A. Sr.</u> (cor perjury that I have read the foregoing summary and schedules, consisting correct to the best of my knowledge, information, and belief. | poration or partnership) nar | ned as debtor in this case, declare under penalty of s heets, and that they are true and |
| Date | Gignature: | |
| | (Print or type na | me of individual signing on behalf of debtor.) |
| (An individual signing on behalf of a partnership or corporation must ind | icate position or relationship | o to debtor.) |
| Penalty for making a false statement or concealing property: Fine a | | sonment for up to 5 years or both. 18 U.S.C. §§ |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571

Form 7 (12/03)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO

| In re: Tharp, Steven A. Sr. | Case No. | |
|-----------------------------|--------------|------------|
| (Name) | | (if known) |
| Debtor | | |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filling of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sale proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor.

11 U.S.C. § 101.

1. Income from employer or operation of business

None - o

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of the calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petitin is filed, state income for each spouse's eparately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless spouses are separated and a joint petition is not filed.)

| SOURCE (if more than one) | ΑN | MOUNT |
|---------------------------------|----|--------------|
| | | |
| 2004 income from Brewster Dairy | \$ | 32725.00 |
| 2003 income from Brewster Dairy | \$ | 30805.00 |
| 2002 income from Brewster Dairy | \$ | 38254.00 |

2. Income other than from employment or operation of business None - ξ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) SOURCE **AMOUNT** 3a. Payments to areditors None - ξ List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) NAME AND ADDRESS DATES OF **AMOUNT AMOUNT** OF CREDITOR **PAYMENT** PAID STILL OWING 3b. -None - ξ List all payments made within one year immediately preceding the commencement of this case to ar for the benefit of creditors who are ar were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) NAME AND ADDRESS DATES OF **AMOUNT AMOUNT** OF CREDIT OR AND **PAYMENT** PAID STILL OWING **RELATIONSHIP TO** DEBTOR

4a. Suits and administrative proceedings, executions, garnishments and attachments None - ξ

List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filling of this bankruptcy case. (Marriage debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT STATUS OR NATURE OF COURT OR AND CASE NUMBER **PROCEEDING** AGENCY AND DISPOSITION LOCATION

4b. -

None - ξ

Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF PERSON FOR
WHOSE BENEFIT
PROPERTY WAS SEIZED

DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foredosures and returns

None - ξ

List all property that has been repassessed by a creditor, sold at a foredosure side, transferred through a deed in lieu of foredosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filling under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filled, unless the spouses are separated and a joint petition is not filled.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

6a. Assignments and receiverships

None - ξ

Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS ASSIGNEE DATE OF ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT

6b. -

None - ξ

List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE AND NUMBER DATE OF ORDER

DESCRIPTION AND VALUE OF PROPERTY _____

7. Gifts

None - ξ

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR IF ANY DATE OF GIFT DESCRIPTION AND VALUE OF

GIFT

8. Losses

None - ξ

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIBE CIRCUMSTANCES AND, IF LOSS WAS COVER-

DATE OF LOSS

ED IN WHOLE OR IN PART BY INSURANCE , GIVE

PARTICULARS

9. Payments related to debt counseling or bankruptcy

None - o

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DEPS CRIPTION AND VALUE OF PROPERTY

Christine A. Johnson 4096 Holiday Street NW Canton, OH 44718 600.00/Atty. Fees

10. Other transfers

None - ξ

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as a security within one year immediately preceding the commencement of this case. (Married debtors filling under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filled, unless the spouses are separated and a joint petition is not filled.)

NAME AND ADDRESS

DATE

DESCRIBE PROPERTY

OF TRANSFEREE, RELATIONSHIP TO DEBTOR TRANSFERRED AND VALUE RECEIVED

11. Closed financial accounts

None - ξ

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, sovings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL AMOUNT AND DATE OF SALE OR CLOSING

BALANCE

12. Safe Deposit Boxes

None - ξ

List each safe deposit or other box or depository in which the debtor has or held securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filled, unless the spouses are separated and a joint petition is not filled.)

NAME AND
ADDRESS OF
BANK OR OTHER
DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

IF ANY

DATE OF TRANSFER OR SURRENDER

13. Setoffs

None - ξ

List all setoffs made by any arealtor, including a bank, against a debt or deposit within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDIT OR DATE OF SET OF F AMOUNT OF SET OF F

14. Property held for another person

None - 8

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY LOCATION OF PROPERTY

15. Prior address of debtor

None - ξ

If the debtor has moved within the two years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

16. Spouses and Former Spouses

None - ξ

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the six-year period immediately preceding the commencement of the case, identify the name of the debtor's spouseand of any former spouse who resides or resided with the debtor in the community property state.

NAME

17a. Environmental Information

None - &

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, sail, surface water, groundwater, or other medium, including, but not limited to, statues or regulations regulations regulations to these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE

ENVIRONMENTAL LAW

ERNMENTAL NOTICE

17b. -

None - ξ

List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL

DATE OF NOTICE

ENVIRONMENTAL

LAW

UNIT

17c. -

None - ξ

List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL DOCKET NUMBER

STATUS OR DISPOSITION

UNIT

18a. Nature location and name of business

None - ξ

If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, withing the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, withing the six years immediately preceding the commencement of this case.

NAME AND ADDRESS

TAXPAYER I.D. NUMBER NATURE OF BUSINESS BEGINNING AND ENDING DATES

| . 18b None - ξ Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. Section 101. |
|--|
| NAME AND ADDRESS |
| 19a. Books, records and financial accounts None - ξ The tallowing questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed. |
| (An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.) |
| List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books or account and records of the debtor. |
| NAME AND ADDRESS DATES SERVICES RENDERED |
| 19b None - ξ List all firms or individuals who within the two years immediately preceding the filling of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor. |
| NAME AND ADDRESS DATES SERVICES RENDERED |
| 19c None - ξ List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of debtor. If any of the books or account and records are not available, explain. |

NAME AND ADDRESS

| | ditors and other parties, including mercanti y preceding the commencement of this cas | | al statement was issued |
|--|--|---|-------------------------|
| NAME AND ADDRESS | DATE ISSUED | | |
| 20a. Inventories None - ξ List the dates of the last two inv the dollar amount and basis of ε | rentories taken of your property, the name each inventory. | of the person who supervised the taking | of each inventory, and |
| DATE OF INVENTORY | INVENTORY SUPERVISOR INVENTORY | DOLLAR AMOUNT OF (Specify cost, market or other bosis) | |
| 20b None-ξ List the name and address of th | ne person having passession of the records | of each of the two inventories reported i | n a., above. |
| DATE OF INVENTORY | NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY R | ECORDS | |
| 21a. Current Partners , Officers None - ξ If the debtor is a partnership, lis | , Directors and Shareholders t the nature and percentage of partnership | interest of each member of the partners | hip. |
| NAME AND ADDRESS | NATURE OF INTEREST | PERCENTAGE OF | |

21b. -

None-ξ

If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE OF STOCK OWNERSHIP NATURE AND PERCENTAGE

22a. Former partners, officers, directors and shareholders None-ξ

If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement

NAME **ADDRESS** DATE OF WITHDRAWAL

22b. -None-ξ

If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None - ξ

If the debtor is a partnership or corporation, list all withdrawals or distributions arealted or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS DATE AND AMOUNT OF MONEY OF RECIPIENT PURPOSE OF OR DESCRIPTION **RELATIONSHIP** WITHDRAWAL AND VALUE OF TO DEBTOR **PROPERTY**

24. Tax Consolidation Group

None - ξ

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of the cose.

NAME OF PARENT CORP. TAXPAYER I.D. NUMBER

25. Pension Funds

None-ξ

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER I.D. NUMBER

| (If completed by an individual or individual and spouse) | | | | |
|---|--|--|--|--|
| I declare under pendity of perjury that I have read the answers thereto and that they are true and correct. | s contained in the foregoing statement of financial affairs and any attachments | | | |
| Date | Signature <u>/s/Steven A. TharpSr.</u> of Debtor | | | |
| Date | Signature <u>/s/</u> of Jaint Debtar (if any) | | | |
| (If completed on behalf of a partnership or corporation) I, declare under penalty of perjury that I have read the answer thereto and that they are true and correct to the best of my kn Date (An individual signing on behalf of a partnership or corporation) | Signature Print Name and Title | | | |
| | ontinuation sheets attached 30 or imprisonment for up to 5 years, or both. 18 U.S.C. § 152 and 3571 | | | |
| | ORNEY BANKRUPT CY PETITION PREPARER (See 11 U.S.C. § 110) U.S.C. § 110, that I prepared this document for compensation, and that I have | | | |
| Printed or Typed Name of Bankruptcy Petition Preparer | Social Security No. (Required by 11 U.S.C. § 110(c).) | | | |
| Address | | | | |
| Names and Social Security numbers of all other individuals who pr | repared or assisted in preparing this document: | | | |
| f more than one person prepared this document, attach additional | signed sheets conforming to the appropriate Official Form for each person. | | | |
| X | Date | | | |

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.

Form B8 (Official Form 8) (12/03)

UNITED STATES BANKRUPT CY COURT NORTHERN DISTRICT OF OHIO

| In re <u>Thorp, Steven A. Sr.</u> Debtor | | Case No. | | | |
|---|---------------------------------|-------------|-----------------------|---|-------------------------------------|
| | | Chapter 7 | | | |
| CHAPTER 7 IND | DIVIDUAL DEBTOR'S | SSTA | EMENT | OF INTENTIC | N |
| 1. I have filed a schedule of assets and liabilitie | es which includes consumer de | ebts secure | ed by property o | of the estate. | |
| 2. I intend to do the following with respect to th | e property of the estate which: | secures th | os e cons umer | delots: | |
| a. Property to Be Surrendered. | | | | | |
| Description of Property | | Creditor | 's name | | |
| | | | | | |
| b. Property to Be Retained | | (Check c | ny applicable s | tatement.) | |
| Description of | Creditor's | | Property is daimed | Property will be redeemed pursuant to 11 U.S.C. § 722 | Debt will be reaffirmed pursuant to |
| Property 2000 Chevrolet Blozer | Name FirstMerit | | as exempt X | 1 11 0.3.C. § 722 | 11 U.S.C. § 524(c) X |
| 1994 Pontiac Bonneville | Paid Off | | | | |
| Date: | <u>/s /S teve</u> Signature | | rpSr. | | · |

^{*} If prepared by a non-attorney preparer, Form B19 Certification and Signature of Non-Attorney must be attached.

CERTIFICATION OF NON-ATTORNEY BANKRUPT CY PETITION PREPARER (See 11 U.S.C. § 110)

| Printed or Typed Name of Bankruptcy Petition Preparer | S ocial S ecurity No. |
|---|--|
| | o dada o dodani, i to. |
| | |
| Address | |
| | |
| Name and Social Security Numbers of all other individuals who prepa | red or assisted in preparing this document. |
| | red or assisted in preparing this document. gnedsheets conforming to the appropriate Official Form for each person. |
| Name and Social Security Numbers of all other individuals who prepared this abaument, attach additional sig | |

impris anment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

B 203 - (12/94)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO

| In | re <u>Tharp, Steven A. Sr.</u> , | Cas e No. |
|--------|--|---|
| | Debtor | Chapter 7 |
| | DIS STORAGE OF COLUMN | |
| | DISCLOSURE OF COMPE | NS ATION OF ATTORNEY FOR DEBTOR |
| 1. | that compensation paid to me within one year before the | l 6(b), I certify that I am the attorney for the above-named debtor(s) and the filing of the petition in bankruptcy, or agreed to be paid to me, for debtor(s) in contemplation of or in connection with the bankruptcy |
| | For legal services, I have agreed to accept | \$ <u>600.00</u> |
| | Prior to the filing of this statement I have received . $\ . \ $ | \$ <u>300.00</u> |
| | Balance Due | |
| 2. | The source of the compensation paid to me was: o Debtor o Other (specify) | |
| 3. | The source of compensation to be paid to me is: o Debtor o Other (specify) | |
| 4. | o I have not agreed to share the above-disclosed associates of my law firm. | d compensation with any other person unless they are members and |
| | | mpensation with another person or persons who are not members or ment, together with a list of the names of the people sharing in the |
| 5. | In return for the above-als alosed fee, I have agreed to | render legal service for all aspects of the bankruptcy case, including: |
| | a. Analysis of the debtor's financial situation, and rer bankruptcy; | ndering advicts the debtor in determining whether to file a petition in |
| | b. Preparation and filing of any petition, schedules, st | ditors and confirmation hearing, and any adjourned hearings thereof; |
| 6. | By agreement with the debtor(s), the above-alsalosed | fee does not include the following services: |
| \top | CE | RTIFICATION |
| | | ment of any agreement or arrangement for payment to me for |
| ļ | 9/22/05 | /s/Christine A. Johnson |
| - | Date | Signature of Attorney |
| l | | Law Office of Christine A. Johnson |
| İ | | Name of law firm |
| - 1 | | |